# Iowa Department of Human Services Offer #401-HHS-014: CCUSO

Contact Information: Sally Titus, stitus@dhs.state.ia.us, (515) 281-6360

This offer is for:		This offer includes the following appropriations:	
	New activity	Civil Commitment Unit for Sexual Offenders	
X	Status quo existing activity	General Administration	
	Improved existing activity		

### **Result(s) Addressed:**

## **Primary Results:**

- Provide treatment services to civilly committed individuals in a secure residential setting
  - Provide a Quality Treatment Environment
- Implement the pre-release transition phase of the program
  - Safe Communities
  - Successful Re-entry of Offenders

## **Program Description:**

#### Who:

The Civil Commitment Unit for Sexual Offenders (CCUSO) provides a secure, long term, and highly structured environment for the treatment of sexually violent predators. Patients have served their prison terms but in a separate civil trial have been found likely to commit further violent sexual offenses. Established in 1999, CCUSO is located on the campus of the Cherokee Mental Health Institute.

The program has grown steadily, and at the beginning of SFY 2009 there were 74 patients in the program. DHS projects that there will be 84 patients by the end of SFY 2009 and 92 patients by the end of SFY 2010. 28% of the CCUSO population is 56 years of age or older. 91% of the population is currently receiving prescriptions to address medical or psychiatric conditions and 25% of the population suffers from heart disease. There are currently five patients in the fifth phase of the treatment program. No patient has completed all five phases of the treatment program, however several patients have been dismissed from the program on judicial orders or trials. DHS projects there will be ten new court-ordered patients in SFY 2009.

#### What:

The five-phase treatment program includes:

- Group and individual therapy, including victim empathy and strategies to prevent relapse
- Educational programming for patients who do not have the basic skills needed to fully participate in therapy
- Physiological assessments to measure and verify results of treatment strategies.

• Transition and discharge planning, and supervision for patients who have completed all five treatment phases, if so ordered by a court.

#### How:

CCUSO has a total of 94.50 staff (FTEs) in SFY 2009 with salaries of approximately \$6.1 million.

CCUSO receives support from staff in General Administration in the areas of policy development, budget oversight and support, performance oversight, and infrastructure improvement.

## **Offer Description:**

## **Today's Activities and Results:**

This offer provides access to highly specialized, extended-term treatment services in a secure residential setting designed to address the specific treatment needs of civilly committed individuals and provide motivation for behavior change. There are five treatment phases providing cognitive-behavior therapy as well as a five-level system that provides increased privileges and responsibilities to motivate patients to participate in treatment and to remain free of problematic behaviors.

CCUSO focuses on ten different treatment areas that are used to assess progress in treatment:

Treatment Areas				
1. Disclosure	6. Cognitive Coping Skills			
2. Insight	7. Sexual Behavior			
3. Personal Victimization	8. Relapse Prevention			
4. Victim Empathy	9. Intimacy Skills			
5. Leisure Skills/Hygiene	10. Problem Solving			

<u>PHASE I</u>: Orientation and Assessment – patients develop a clear understanding about program expectations and rules and undergo complete psychological testing. In order to progress to the next phase, patients must admit to some sexual offense or have a "clean polygraph", complete relaxation and basic cognitive skills training, and demonstrate good behavior for 30 days.

<u>PHASE II</u>: Core Phase – the goal of this phase is education. Patients complete four quarters of classes that teach concepts and skills to help patients control sexual impulses and be able to meet needs in pro-social ways. In order to progress to the next phase, patients must pass polygraph exams relating to sexual disorders, demonstrate good behavior for 90 days, and have no ratings (in each of the ten treatment areas) lower than 3 out of a possible 8 on their last review.

<u>PHASE III</u>: Advanced Phase – the goal of this phase is successful application of basic principles and insights. Patients work on applying the principles and concepts learned in Phase II and on achieving the goals established in their individual treatment plan. In order to progress to the next phase, patients must pass "specific offense polygraphs" if requested, complete "Victim Sheets" and "Victim Letters," demonstrate good behavior for four months, and have no ratings (in each of the ten treatment areas) lower than 5 out of a possible 8 on their last review.

<u>PHASE IV</u>: Honor Phase – the goal of this phase is maturation and refinement of skills in preparation for release. Patients are expected to demonstrate a high level of cooperation, insight, motivation, and application of previously taught principles, should model appropriate behavior for other patients and be able to facilitate as a leader during group discussions. To progress to the next phase, patients must complete a detailed relapse prevention plan, pass a polygraph exam relating to sexual behaviors, demonstrate good behavior for six months, and have no ratings (in each of the ten treatment areas) less than 8 out of a possible 8 on their last review.

<u>PHASE V</u>: Transition Phase – The goal of this phase is successful completion of transition from CCUSO to the community; promotion to phase five requires an order of the committing court. The first part of phase five requires the patient to live in the CCUSO secure apartment setting within the facility. Patients will gradually be given increasing opportunities to go on passes and live in progressively less restrictive settings with close monitoring and clinical assessment of progress.

Having met the requirements for successful completion of the first part of phase five, patients must maintain housing in a halfway house or residential facility outside the CCUSO grounds for six months to one year without violating rules or their relapse prevention plan, successfully maintain employment, attend weekly support therapy groups and individual counseling, fulfill all requirements of the release contract for at least two years, and pass random physiological assessments requested by transitional counselors.

Having met the requirements for successful completion of the second part of phase five, CCUSO staff will recommend release to the committing court. Final discharge from the program requires an order of the committing court.

Patients are currently in the following treatment phases:

Phase I	12%
Phase II	62%
Phase III	13%
Phase IV	6%
Phase V	7%

## **Improved Results Activities**

The Department continues to focus on improving service delivery. However, beyond the offer request to maintain quality services to the estimated 84 individuals, the Department is not seeking funding for additional activities.

## Offer Justification:

# **Legal Requirements:**

Federal:

None.

#### **State:**

The Department of Human Services is required to operate the CCUSO program in order to provide a secure treatment program for sexually violent predators as mandated by the provisions of Chapter 229A of the Code of Iowa. The statute requires that DHS provide treatment services within a

secure setting to all individuals who are civilly committed to the program as violent sexual predators. The Department does not have the authority to deny admissions. The ability to provide adequate treatment services has been a critical factor in both State and Federal Court decisions that upheld the constitutionality of civil commitment programs for violent sexual predators.

#### **Rationale:**

CCUSO continues to provide highly specialized, extended-term services in a secure residential setting designed to address the specific treatment needs of patients and provide motivation for behavior change. The level of success in changing patient behavior may best be measured by the reduction of risk of re-offending and the successful re-entry of the patient into society.

DHS projects that there will be 84 patients by the end of SFY 2009 and 92 patients by the end of SFY 2010. There are currently five patients in the fifth phase of the treatment program. No patient has completed all five phases of the treatment program, however several patients have been dismissed from the program on judicial orders or trials. The program provides a safe and healthy living environment where CCUSO patients are able to learn the skills necessary to effectively improve their quality of life.

Per Chapter 229A of the Code of Iowa, DHS does not have the authority to deny court-ordered admissions to CCUSO. To support the anticipated population increase of 10 additional court-ordered patients by the end of SFY 2010 and to maintain the safety of those patients currently in the program, additional resources including 11 FTE's are being requested.

The pre-release transition phase of the program is crucial in order to provide the patient with a controlled environment in which they are able to demonstrate relapse prevention skills and other interventions so sex offending is not likely to occur.

Successful re-entry of the patient is the cornerstone of preventing future offenses, and ensuring safe communities. Continued levels of treatment and supervision are crucial to ensuring that vulnerable populations are best protected upon the patient's reentry into society.

These activities are considered essential to the effectiveness of the CCUSO treatment program and the pre-release transitional program.

#### **Results:**

Result:	SFY 2008 Actual Level	SFY 2009 Projected Level	SFY 2010 Offer Level
Number served on June 30 <sup>th</sup>	74	84	92
Patients who demonstrate progress in treatment by moving to next phase	9	10	11

These results assume the level of funding requested in the offer in all appropriations as well as full funding of salary adjustment. If funding is insufficient in either area, results to be achieved will be modified to reflect the impact.